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November 15, 2002

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**FAX**

RECIPIENT/ PHONE NO.	FAX NO.	COMPANY/ CITY, STATE, COUNTRY
TC1700 – Ex. J. Rhee Group Art Unit 1772)	703-872-9310	U.S. Patent Office Washington, DC

John S. Pratt

FROM

12

PAGES (WITH COVER)

8493

REFERENCE NO

I4060/205649

CLIENT/MATTER NO.

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**COMMENTS**

Please acknowledge receipt of the enclosed:

- 1) Transmittal Form PTO/SB/21
- 2) Fee Transmittal – no fee due
- 3) Amendment and Response to Office Action  
including Marked-up copy of amended  
claims pursuant to 37 C.F.R. 1.121(c )

**OFFICIAL**  
**FAX RECEIVED**

NOV 18 2002

GROUP 1700

**For:**

Applicant(s): Daniel et al.

Title: Orthogonally Ambiguous Carpet Tile

Serial No.: 09/783,354

Filing Date: February 14, 2001

Attorney Docket No. IRC293 I4060/205649

TO BE COMPLETED BY KS OPERATIONS CENTER

TRANSMISSION RECEIPT DATE/TIME:

COMPLETED BY:

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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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## TRANSMITTAL FORM

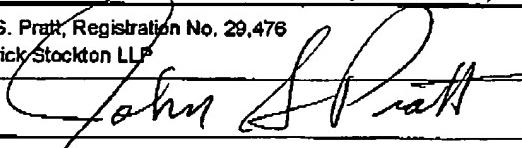
(to be used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		<b>Application Number</b> 09/783,354
		<b>Filing Date</b> February 14, 2001
		<b>First Named Inventor</b> Daniel et al.
		<b>Group Art Unit</b> 1772
		<b>Examiner Name</b> Jane Rhee
<b>Total Number of Pages in This Submission</b>		<b>Attorney Docket Number</b> 14060/205649

**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i>  <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i>  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i>
<div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Remarks</div> <div style="border: 1px solid black; height: 30px; overflow: auto; width: 100%;"> </div>		

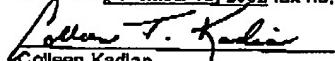
**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

<b>Firm or Individual name</b>	John S. Pratt, Registration No. 29,476 Kilpatrick Stockton LLP
<b>Signature</b>	
<b>Date</b>	November 15, 2002

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**CERTIFICATE OF FACSIMILE TRANSMISSION**

I hereby certify that this Amendment and Response to Office Action and all documents referred to as enclosed are being facsimile transmitted to the U.S. Patent and Trademark Office on November 15, 2002 fax no. 703-672-9310 at TC1700 (ART UNIT 1772).

  
 Colleen Kadian

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## FEE TRANSMITTAL for FY 2002

*Patent fees are subject to annual revision.*

**TOTAL AMOUNT OF PAYMENT**

**(\$)** **0**

<b>Complete If Known</b>	
Application Number	09/763,354
Filing Date	February 14, 2001
First Named Inventor	Daniel, et al.
Examiner Name	Jane Rhee
Group / Art Unit	1772
Attorney Docket No.	14060/205649

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input type="checkbox"/> Deposit Account: Deposit Account Number <input type="text" value="11-0855"/>	
Deposit Account Name <input type="text" value="KILPATRICK STOCKTON LLP"/>	
<b>The Commissioner is authorized to:</b> (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	

<b>FEES CALCULATION</b>						
<b>1. BASIC FILING FEE</b>						
Large Entity Fee Code (\$)	Fee (\$)	Small Entity Fee Code (\$)	Fee (\$)	Fee Description	Fee Paid	
101	740	201	370	Utility filing fee	<input type="text"/>	
105	330	206	165	Design filing fee	<input type="text"/>	
107	510	207	255	Plant filing fee	<input type="text"/>	
108	740	208	370	Reissue filing fee	<input type="text"/>	
114	160	214	80	Provisional filing fee	<input type="text"/>	
<b>SUBTOTAL (1)</b>					<b>(\$)</b> <b>0</b>	
<b>2. EXTRA CLAIM FEES</b>						
Total Claims	45	-46 **	= 0	Extra Claims	Fee from below	Fee Paid
Independent Claims	4	-9 **	= 0	<input type="text"/>	<input type="text" value="18"/>	<input type="text" value="0"/>
Multiple Dependent			X	<input type="text"/>	<input type="text" value="84"/>	<input type="text" value="0"/>
				<input type="text"/>	<input type="text"/>	<input type="text" value="0"/>
Large Entity Fee Code (\$)	Fee (\$)	Small Entity Fee Code (\$)	Fee (\$)	Fee Description	Fee Paid	
103	18	203	9	Claims in excess of 20	<input type="text"/>	
102	84	202	42	Independent claims in excess of 3	<input type="text"/>	
104	280	204	140	Multiple dependent claim, if not paid	<input type="text"/>	
109	84	208	42	** Reissue independent claims over original patent	<input type="text"/>	
110	18	210	9	** Reissue claims in excess of 20 and over original patent	<input type="text"/>	
<b>SUBTOTAL (2)</b>					<b>(\$)</b> <b>0</b>	

\*\*or number previously paid, if greater; For Reissues, see above

<b>FEES CALCULATION (continued)</b>						
<b>3. ADDITIONAL FEES</b>						
Fee Code	Large Entity Fee (\$)	Small Entity Fee Code (\$)	Fee (\$)	Fee Description	Fee Paid	
105	130	205	85	Surcharge - late filing fee or oath	<input type="text"/>	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	<input type="text"/>	
139	130	139	130	Non-English specification	<input type="text"/>	
147	2,520	147	2,520	For filing a request for reexamination	<input type="text"/>	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	<input type="text"/>	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	<input type="text"/>	
115	110	215	55	Extension for reply within first month	<input type="text"/>	
116	400	218	200	Extension for reply within second month	<input type="text"/>	
117	920	217	460	Extension for reply within third month	<input type="text"/>	
118	1,440	218	720	Extension for reply within fourth month	<input type="text"/>	
128	1,980	228	980	Extension for reply within fifth month	<input type="text"/>	
119	320	218	180	Notice of Appeal	<input type="text"/>	
120	220	220	180	Filing a brief in support of an appeal	<input type="text"/>	
121	290	221	140	Request for oral hearing	<input type="text"/>	
138	1,510	138	1,510	Petition to institute a public use proceeding	<input type="text"/>	
140	110	240	55	Petition to revive - unavoidable	<input type="text"/>	
141	1,280	241	640	Petition to revive - unintentional	<input type="text"/>	
142	1,280	242	640	Utility issue fee (or reissue)	<input type="text"/>	
143	460	243	230	Design issue fee	<input type="text"/>	
144	620	244	310	Plant issue fee	<input type="text"/>	
122	130	122	130	Petitions to the Commissioner	<input type="text"/>	
123	50	123	50	Processing fee under 37 CFR 1.17 (a)	<input type="text"/>	
126	180	128	180	Submission of Information Disclosure Stmt	<input type="text"/>	
581	40	581	40	Recording each patent assignment per property (times number of properties)	<input type="text"/>	
146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	<input type="text"/>	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	<input type="text"/>	
179	740	279	370	Request for Continued Examination (RCE)	<input type="text"/>	
169	600	169	900	Request for expedited examination of a design application	<input type="text"/>	
Other fee (specify) _____						
*Reduced by Basic Filing Fee Paid					<b>SUBTOTAL (3)</b>	
					<b>(\$)</b> <b>0</b>	

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GROUP 1700

<b>SUBMITTED BY</b>						<b>Complete If Applicable</b>	
Name (Print/Type)	John S. Pratt	Registration No. Attorney/Agent	29,476	Telephone	404-815-8500	Date	November 15, 2002
Signature	<i>John S. Pratt</i>						

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**Burden Hour Statement:** This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.